

NAME: USA vs. Edward Philpot
SSN: 293-74-2856

- 1) EMPLOYMENT START DATE: 5/23/2005
- 2) CURRENTLY EMPLOYED: YES OR (NO) (circle one)
- 3) JOB TITLE: LABORER
- 4) ANNUAL GROSS INCOME: 22,600 - 2006
11,100 - 2007
- 5) IF NOT CURRENTLY EMPLOYED, PLEASE GIVE DATE OF
TERMINATION: 7/20/2007

RECEIVED
2007
U.S. ATTORNEY - SDOH
FLU

IF KNOWN, PLEASE PROVIDE PLACE OF NEW EMPLOYMENT:

EMPLOYER NAME: UNKNOWN

EMPLOYER ADDRESS: _____

TELEPHONE NO.: _____

- 6) HOME ADDRESS OF EMPLOYEE (IF AVAILABLE, AS REFLECTED IN YOUR
RECORDS): 704 Gordon Smith Blvd., Apt 11
Hamilton, OH 45013

TELEPHONE NO.: 513-907-2123

- 7) MAILING ADDRESS OF YOUR PAYROLL DEPARTMENT AND PAYROLL
OFFICER'S NAME:

30 OVERBROOK DR., SUITE D
MONROE, OH 45050

12/3/07

DATE

Quana Kinder

SIGNATURE OF CERTIFYING OFFICIAL

Controller 513-539-3489

TITLE AND PHONE NUMBER

